

September 30, 2021

The Honorable Gilbert R. Cisneros Jr.
Undersecretary of Defense for Personnel and Readiness
The Pentagon 3E986

Dear Undersecretary Cisneros,

Just last week at Fort Drum, three service members died by suicide in a 48-hour period. The tragedy at Fort Drum is a reminder of the epidemic of suicide among veterans and service members. As you know from our previous work together, one of my priorities is ensuring service members have access to mental health care.

If significant interventions are not implemented, we know that we will continue to see deeply concerning suicide rates among our service members. Over the last ten years, we have seen the veteran suicide rate rise to twice that of the civilian suicide rate. A study released this summer by the Cost of War Project found that since September 11th, more than four times as many active duty personnel and veterans died by suicide than died during military operations.¹ Further, Iraq and Afghanistan Veterans of America (IAVA) found that more than half of its members knew a post-9/11 veteran who took his or her own life and, in the last two weeks of August, calls to IAVA's mental health hotline were up 70%. These statistics are a clear call to action.

One of my concerns is that service members fear the reaction they will receive if they ask for the mental health help they need. Reducing the stigma associated with mental health is paramount to reducing the incidence of suicide among service members and veterans. That is why I am cosponsoring the *Brandon Act*, which will ensure service members have a confidential route to seek mental health treatment.

A significant number of service member suicides are related to marital problems and/or failed or failing relationships. Last year's Department of Defense Annual Suicide Report specifically stated that, "[r]elationship stressors, such as failed or failing relationships, are frequently cited risk factors for suicide. In the military, failed or failing relationships in the 90 days prior to death were reported in Active Component (39.2%) and Reserve Component (45.2%) service members who died by suicide in CY 2018."² However, DoD does not provide in

¹ "High Suicide Rates among United States Service Members and Veterans of the Post-9/11 Wars", Brown University, Thomas Howard Suitt, III, Boston University, June 21, 2021
https://watson.brown.edu/costsofwar/files/cow/imce/papers/2021/Suitt_Suicides_Costs of War_June 21 2021.pdf

² *Annual Suicide Report, Calendar Year 2019*, Department of Defense, Undersecretary of Defense for Personnel and Readiness, pg. 18

depth analysis in the annual report of this issue, such as how DoD is responding to contributing factors to suicide such as a failing relationship and what resources are available to those in need of non-medical counseling.

As Chairwoman of the Senate Armed Services Personnel Subcommittee, I am committed to making sure that there are the appropriate resources and policies in place to address the mental health challenges that too many of our service members are facing. I would appreciate your responses to the following questions:

1. Has DoD conducted a Defense-wide survey or study on how marital/ relationship issues and failed or failing relationships contribute to service members' suicide, suicide ideation and mental health stress? If not, what does DoD need to conduct such a survey? Such a survey should include spouses and partners of service members.
2. Has DoD ever conducted a Defense-wide survey or study of how service members and their spouses or partners cope with the stress of military life and its contribution to mental health and relationship stress? If not, what does DoD need to conduct such a survey?
3. What resources are available for service members, their spouses and partners for coping with relationship stress, such as availability and use of couples therapy both on and off post and marital retreats?

I would appreciate a response from the Department of Defense on this issue as soon as practicable. I look forward to working together to reduce suicide in the military and ensure that we are providing the needed mental health supports for our service members. We must do more for those who have done so much for our country.

Sincerely,

A handwritten signature in blue ink that reads "Kirsten Gillibrand". The signature is fluid and cursive, with the first name "Kirsten" and last name "Gillibrand" clearly distinguishable.

Kirsten Gillibrand
Chairwoman, Subcommittee on Personnel
Senate Armed Services Committee

CC:

Dr. Karin A. Orvis

Director, Defense Suicide Prevention Office